

Electronic Patent Application Fee Transmittal

Application Number:	10717082			
Filing Date:	19-Nov-2003			
Title of Invention:	Lateral flow immunoassay devices for testing saliva and other liquid samples and methods of use of same			
First Named Inventor/Applicant Name:	Huiyan Guo			
Filer:	Fred C. Hernandez/Cecilia Tobin			
Attorney Docket Number:	E-006U			
Filed as Small Entity				
Utility Filing Fees				
Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Basic Filing:				
Pages:				
Claims:				
Miscellaneous-Filing:				
Petition:		Adjustment date: 07/07/2008 CKHLOK 05/19/2008 INTERSW 00003193 506311 10717082 02 FC:2253 525.00 CR		
Petition-revive unintent. abandoned appl	2453	1	770	770
Patent-Appeals-and-Interference:				
Post-Allowance-and-Post-Issuance:				
Extension-of-Time:				

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Extension - 3 months with \$0 paid	2253	1	525	525
Miscellaneous:				
Total in USD (\$)				1295

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Huiyan Guo et al. Art Unit : 1797
Serial No. : 10/717,082 Examiner : SIEFKE, SAMUEL P.
Filed : November 19, 2003 Conf. No. : 1853
Title : LATERAL FLOW IMMUNOASSAY DEVICES FOR TESTING SALIVA AND
OTHER LIQUID SAMPLES AND METHODS OF USE OF SAME

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

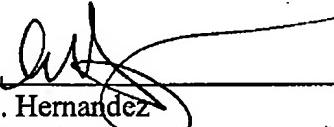
RESPONSE TO RESTRICTION REQUIREMENT

Responsive to the action mailed May 30, 2007, applicant elects Group I, including claims 1-38 and 48. The election is made without traverse.

Any fees and/or credits that may be due in connection with the filing of this paper or with this application may be applied to Deposit Account No. 50-0311. Applicant petitions for a three-month extension of time.

Respectfully submitted,

Date: May 16, 2008


Fred C. Hernandez
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UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>7-1-08</u>		2 Serial/Patent # <u>10/713,082</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
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11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Kimberly Inabinet</u>		TITLE: <u>Petitions Examiner</u>	
SIGNATURE: <u>Kimberly Inabinet</u>		PHONE: <u>x24618</u>	
OFFICE: <u>Office of Petitions</u>			
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